

three or four drachms. He had frequently been in the custom of inhaling it, and that very day had repeatedly been inspiring small quantities of it by holding his nostrils over the mouth of the bottle. That asphyxia was the proximate cause of death, the history of the case, and the post-mortem appearances, leave no room for doubt. That the asphyxia was consequent upon the inhalation of chloroform seems also evident from the history of the case, the post-mortem appearances, and the results of the examination of the blood; though at the same time it is probable that the fatal issue may have been facilitated by the unfavourable position in which the body was placed when the insensibility was induced, and possibly also by the morbid conditions which existed within the chest. Not having seen the body until some time after it had been raised up from the counter, I examined those who saw him lifted up, and from the account furnished by them, though his mouth and nostrils were lying upon the folds of his apron, upon the hard board before him, they did not consider his position sufficient to account for suffocation."

[Another case of death from inhalation of chloroform will be found noticed in our Domestic Summary, p. 572.]

57. *Ether in Tetanus*.—Mr. HOPGOOD relates (*Med. Times*, Jan. 15th) a case of tetanus, in a boy nine years of age, resulting from an incised wound on one of his knuckles, successfully treated by the inhalation of ether.

M. VELPEAU employed chloroform in a case of traumatic tetanus in a man thirty years of age, admitted into La Charité. The spasms were arrested whilst the patient was under the influence of the article, but a fatal result was not prevented.

58. *Chloroform in Typhus Fever*.—(*Lancet*, January 29.) Dr. FAIRBROTHER has employed chloroform in a bad case of typhus fever, to produce a sedative effect. The patient was delirious, the system worn out for want of sleep, and life was despaired of. The soporific state was induced in a few seconds, and continued for half an hour. It was several times subsequently repeated, at intervals, and with very satisfactory results. The patient recovered.

59. *On the Application of Ether in Midwifery*.—Dr. Roux, of Toulon, who has closely investigated the subject, has come to the following, among other conclusions, respecting the use of ether in midwifery.

1. No injury is done to females in the puerperal state by the respiration of ether vapour.

2. That in ordinary deliveries, ether vapour, by suppressing pain, does not interfere with labour.

3. That in difficult labours it is desirable, both for the mother and child, to prevent suffering.

4. The uterus and abdominal muscles continue to contract when the female is under the influence of ether.

5. The child does not appear to participate in the stupefaction produced by ether.

6. The various changes following delivery are not impeded or aggravated—thus the hemorrhage is not increased, and the milk is equally secreted.—*London Med. Gaz.*, October, 1847, from *Gaz. Méd.*, October 9.

60. *Use of Chloroform in Natural Labour*.—Dr. SAMUEL ASHWELL, late Obstetric Physician and Lecturer to Guy's Hospital, in a letter to the editor of the *Lancet*, (March 11, 1848,) condemns the use of chloroform in natural labour. He asks: "Why is this great risk to be run? It is not pretended that it shortens the duration of the process; nay, if anything be attributed to chloroform on this head, it is almost certain that delay must be the consequence of its exhibition. There is no evidence to show that any favourable effect, save the unconsciousness of pain, can be traced to its influence.

"I do not deny that physical pain is an evil; but before we attempt to abolish this hitherto invaluable accompaniment of natural labour, it is incumbent on the advocates of the use of chloroform to prove to demonstration that this interference is entirely safe. A careful perusal of one of the able and admirable lectures of

Dr. Tyler Smith (vide *The Lancet*, March 27, 1847) will satisfy any impartial inquirer that obstetric etherization is, at least, of very doubtful benefit, and of very complicated and uncertain operation."

He quotes some remarks of Baron Dubois (see Number of this Journal for October, 1847, p. 521), and of Mr. Tyler Smith, and then observes:

"These facts, and three deaths at least from the new agent, chloroform, besides many other serious results, will probably satisfy most practitioners that 'a meddling midwifery' is still a bad midwifery."

"In common with most teachers, I have long inculcated at Guy's Hospital, that unnecessary interference with the providentially arranged process of healthy labour is sure, sooner or later, to be followed by injurious and fatal consequences."

"I think the chloroform will be no exception to these precepts; nay, so sure am I that it needs only to be extensively used to insure its entire abandonment, that I would willingly leave it to such a result, if it might be accomplished without further loss of life. But the instances in which it has already proved fatal, although they will alarm, may not so quickly, as is to be desired, lead to its final relinquishment. It is, therefore, a duty to urge every just plea against its further use."

"I forbear," he further says, "to enter into the question—whether there be any form of labour in which chloroform should be used?—further than to say, in instrumental and flooding cases, we rely as a considerable evidence of the safety of the patient, and of the uninjured state of the womb and adjacent parts, on that very pain which it is the purpose of the gas to destroy. Whether in the very difficult cases of turning, where the womb is most firmly and tonically contracted round the child, it might be of use, I am not prepared to say. I fear, however, it would produce but little benefit. Lately, at Enfield, I was consulted in a case of rigid perinæum, where the chloroform was fully exhibited, under the impression that it might induce relaxation. No such result followed. Dr. Millar, with great promptitude, applied twenty leeches to the part, and the child was eventually born dead. If there was any effect produced here, it was to weaken the uterine effort, but whether the chloroform produced the death of the child, I cannot say."

61. *Delirium caused by Inhalation of Chloroform.*—Dr. MITCHELL, of Dublin, relates a case in which he administered chloroform to a patient in labour, with the effect of rendering her violently delirious.—*Lond. Med. Gaz.*, Jan. 1848, from *Dub. Med. Press*.

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62. *Recovery from a poisonous dose of Strychnia.*—Dr. THOMAS ANDERSON records, in the *Monthly Journal and Retrospect of the Medical Sciences*, a case in which seven grains of strychnia were taken without producing fatal consequences. The subject of the case was a gentleman who had long suffered from severe tic douloureux, for the relief of which he was in the habit of taking muriate of morphia, in increased doses, until three and a half grains were necessary to produce its effect. Having occasion to go a short distance in the country on business, he took, previous to setting out, his usual dose, $3\frac{1}{2}$ grains of strychnine, given him by an apothecary by mistake for muriate of morphia, which he placed on his tongue and swallowed;—he remarked at the time that it was extremely bitter, and that the taste was more than usually persistent, but it did not occur to him that anything was wrong. Shortly after, however, while walking along the street, he felt slightly indisposed, the most prominent symptom being a sense of numbness in the back of the legs, which he attributed to the effects of cold, to which he had been exposed in the early part of the morning. As these symptoms did not appear of any importance, he proceeded by a public conveyance to the village where his business lay, and returned by the next opportunity. During the whole of this time the symptoms remained precisely as they were the moment he first observed them; but as he was walking along, on his return, they suddenly increased, the numbness being accompanied by a sense of want of power, and a sort of drag-